

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/541071 FILING DATE

APPLICANT(S)

5/25/07 CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3						
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11						
12						
13						
14			3		1	
15			3		3	
16			3		3	
17			3		3	
18			3		3	
19					1	
20			1		1	
21						3
22						3
23						3
24						3
25						3
26						1
27						1
28						1
29						1
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50						
TOTAL IND.			2		2	
TOTAL DEP.		2	18	2	37	2
TOTAL CLAIMS			20		39	

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

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